F-299

PTO/SB/01 (03-01)
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DECLARATION FOR UTILITY OR

Attorney Docket Number

DECLARATION FO	First Named Inv	entor	Zubol	s ;					
DESIG PATENT APPL		COMPLETE IF KNOWN							
(37 CFR 1	Application Num	ber	. /						
Declaration Submitted OR	Declaration Submitted after Initial Filing (surcharge	Filing Date		10/17/200)3				
		Group Art Unit							
with Initial Filing	(37 CFR 1.16 (e)) required)	Examiner Name							
As a below named inventor, I hereby declare that:									
My residence, mailing address, ar	My residence, mailing address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
Instrumentation and Methods for use in Implanting a Cervical Disc Replacement Device									
(Title of the Invention)									
the specification of which	(Thue Of the	IIIvenuony							
X is attached hereto	·								
OR ·									
was filed on (MM/DD/YYYY)		as United Sta	ites Application	Number or PCT Inte	emational				
Application Number	and was am	ended on (MM/DD/YYY	m		(if applicable).				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy YES	Attached?				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: X	respondence to: X Customer Number or Bar Code Label 36402 OR Correspondence address below						
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Country	Telep	hone			Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])	Rafail		Family Name or Surname		Zubok;		
Inventor's Signature	X4 mi			Date 10/17/03			
Residence: City Midlar	d Park,	State NJ	C	ountry US	Citizenship	US	
Mailing Address 222 Spruce Street							
City Midlar	d Park,	State NJ		ZIP 07432	Country	US	
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])	Michael W.		Family N or Surna		Dudasik;		
Inventor's Signature Date 10/12/03							
Residence: City	tley,	NJ State	Cou	ntry US	Citizenship	US	
Mailing Address 29 Daily Street							
City Nutley,		State NJ	ZIP	07110	Country	uș	
X Additional inventors are being named on the 1_supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

F-299

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])			Family Name or Sumame				
Joseph P.			Errico				
Inventor's Signature						Date 10/17/03	
Residence: City Green Brook,	State	e NJ Country US			itizenship US		
Mailing Address 29 Deer Path Circle							
Mailing Address			•				
City Green Brook,	State	NJ	ZIP	08812	Country	US	
Name of Additional Joint Inventor, if an	y:		A petitio	on has been filed	d for this	unsigned inventor	
Given Name (first and middle [if any]))			Family Nar	ne or Su	ırname	
Inventor's Signature Date						Date	
Residence: City			Country			Citizenship	
Mailing Address							
Mailing Address							
	State		ZIP Con		Cour	ntrv	
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]) Family Name or Sumame				r Sumame			
				٠.			
Inventor's Signature					Date		
Residence: City	State		Country			Citizenship	
Mailing Address							
Mailing Address							
City	State		ZIP		Co	untry	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.